U.S. Appl. No DO/US WORK	Internation Ippl No. US 03/4008
Application filed by: 20 months 2 30 mon	/
INTERNATIONAL APPLICATION PAPERS IN THE International application (RECORD COPY) Article 19 amendments PCT/IB/331 PCT/IPEA/409 IPER (PCT/IPEA/416 on front) Annexes to 409 Priority document(s) No. INTERNATIONAL APPLICATION ON DOUBLE	Request form PCT/RO/101 PCT/IB/302 PCT/ISA/210-Search Report Search Report references Other
RECEIPTS FROM THE APPLICANT: (other than che Basic National Fee (paid or authorized to charge)  Translation of international application as filed:  Description  Claims  Words in the drawing figure(s)  Article 19 amendments  Annexes to 409  Oath / Declaration Un Executed  DNA diskette	Preliminary amendment(s) filed  Information Disclosure Statement Assignment document Power of attorney/Change of address Substitute specification Verified small status claim Other
Notes: Use IA from IB	
No date sheet filed	
35 U.S.C. 371 - Receipt of Request (PTO-1390)	WIPO Publication
Date acceptable oath / declaration received	17 JUN 2005 Publ. ication No. WOO_4/ OS8 288 A
Date complete 35 U.S.C 371 requirements met 102(e) Date	Publication Date
Date of completion of DO/EO 906 - Notification of Missin	Publication Language
Date of completion of DO/EO 907 - Notification of Accep	tance for 102(e) date Not Published
Date of completion of DO/EO 911 - Application accepted	II □ 50 manan
Date of completion of DO/EO 905 - Notification of Missi  Date of completion of DO/EO 916 - Notification of Defe	
Date of completion of DO/EO 903 - Notification of Acce	<u>t</u>

Date of completion of DO/EO 909 - Notification of Abandonment

FILED UNDER 35 U.S.C. 371

NUMBER and ISSUE DATE

U.S. UTILITY Patent Application

APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
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		Assistant Examiner	Total Claims		Print Claim for O.G		
			DRAWING				
Amount Due	Date Paid	7	Sheets Drwg.	Figs.Drw	g. Print Fig.		
<del></del>	<u></u>	Primary Examiner		l	k		
TERMINAL DISCLAIMER		PREPARED FOR ISSUE	Application Examiner				
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